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Júnior, João Mário Pessoa; Clementino, Francisco de Sales; Santos, Raionara Cristina de Araújo; Vitor, Allyne Fortes; Miranda, Francisco Arnaldo Nunes de

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## Enfermagem e o processo de desinstitucionalização no âmbito da saúde mental: revisão integrativa

Nursing and the deinstitutionalization process in the mental health scope: integrative review

La enfermería y el proceso de desinstitucionalización en el contexto de la salud mental: una revisión integradora

João Mário Pessoa Júnior<sup>1</sup>; Francisco de Sales Clementino<sup>2</sup>; Raionara Cristina de Araújo Santos<sup>3</sup>; Allyne Fortes Vitor<sup>4</sup>; Francisco Arnaldo Nunes de Miranda<sup>5</sup>

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### ABSTRACT

**Objective:** To synthesize the knowledge produced on the nursing performance in the deinstitutionalization process in mental health scope. **Method:** It is an integrative literature review conducted from search on the internet for studies in databases like CINAHL, Scopus and LILACS. We have identified 72 papers, of which, seven were included in the review, upon reading the taking into account the adopted inclusion and exclusion criteria. **Results:** The nursing performance in the face of the deinstitutionalization process in mental health has prioritized interdisciplinary therapeutic activities aimed at the guided by the principles of comprehensiveness and humanization. **Conclusion:** It is recognized that the process of training in nursing to equip future professionals to develop skills and competencies considering the new logic of organization of mental health services in the territory.

**Descriptors:** Nursing; Desintitucionalization; Mental Health.

<sup>1</sup> Nurse, Ph.D., Professor of the Federal University of Rio de Janeiro. E-mail: joaomariopessoa@gmail.com.

<sup>2</sup> Nurse, Ph.D., Professor of the Federal University of Campina Grande. E-mail: fclementino67@yahoo.com.br.

<sup>3</sup> Nurse, Postdoctoral, temporary Lecturer at the Federal University of São Carlos. E-mail: raionara\_cristina@yahoo.com.br.

<sup>4</sup> Nurse, Ph.D., Professor of the Federal University of Rio Grande do Norte. E-mail: allynefortes@yahoo.com.br.

<sup>5</sup> Nurse, Ph.D., Professor, Department of Nursing of the Federal University of Rio Grande do Norte, Fellow Productivity CNPQ. E-mail: farnoldo@gmail.com.

## RESUMO

**Objetivo:** Sintetizar o conhecimento produzido sobre a atuação da enfermagem no processo de desinstitucionalização no âmbito da saúde mental. **Método:** Trata-se de revisão integrativa da literatura realizada a partir de busca *on-line* de estudos nas bases de dados: CINAHL, Scopus e LILACS. Identificou-se o total de 72 artigos, dos quais sete foram incluídos na revisão mediante os critérios de inclusão e exclusão adotados. **Resultados:** A atuação de enfermagem perante o processo de desinstitucionalização em saúde mental tem priorizado atividades terapêuticas interdisciplinares pautadas nos preceitos da integralidade e humanização. **Conclusão:** Reconhece-se que o processo de formação em Enfermagem deve instrumentalizar o futuro profissional para o desenvolvimento de habilidades e competências considerando a nova lógica de organização dos serviços de saúde mental no território.

**Descritores:** Enfermagem; Desinstitucionalização; Saúde Mental.

## RESUMEN

**Objetivo:** Sintetizar el conocimiento producido sobre la actuación de enfermería en el proceso de desinstitucionalización en el contexto de la salud mental. **Método:** Se trata de una revisión integrada de la literatura por medio de la búsqueda de los estudios en línea de bases de datos: CINAHL, LILACS y Scopus. Se identificaron un total de 72 artículos, de los cuales siete fueron incluidos en la revisión, mediante la lectura de los títulos, los resúmenes y teniendo en cuenta los criterios de inclusión y exclusión adoptados. **Resultados:** La actuación de la enfermería frente el proceso de desinstitucionalización de la salud mental ha dado prioridad a las actividades terapéuticas interdisciplinarias guiada por los principios de integralidad y la humanización. **Conclusión:** Se reconoce que el proceso de formación en enfermería debería equipar a los futuros profesionales para desarrollar las habilidades y competencias teniendo en cuenta la nueva lógica de la organización de los servicios de salud mental en el territorio.

**Descriptores:** Enfermería; Desinstitucionalización; Salud Mental.

## INTRODUCTION

The objective of this study is about to the role of nursing in the process of deinstitutionalization of psychiatric care in the world context. It is known that the deinstitutionalization of care to mental patients seeks to deconstruct the asylum and exclusionary model, characterized by isolation and punitive treatment of patients. Strengthens the idea of the movement of Psychiatric Reform, which requires health professionals a focused humanized practice for psychosocial rehabilitation.<sup>1-3</sup>

In Brazil, supported by Law No. 10.216/2001, the Brazilian Psychiatric Reform begins in the late 1970s with the workers in Mental Health Movement, known as anti-asylum struggle movement and under the influence of the Italian transformation model, pointed deinstitutionalization as a fundamental premise in the reorganization of services and the mental health practices.<sup>1-2</sup> It redefines the focus of the psychiatric clinic for the process to take care of a multidisciplinary nature. Therefore, the movement proposed overcoming the psychiatric paradigm not alluding to the dismantling of hospitals, but all the power relations surrounding the disease object, which may be even in the territorial services.<sup>4-6</sup>

Separating controversies and challenges when discussing the deinstitutionalization as a criterion for a new paradigm, possibilities appeared for building new approaches to mental illness, signing up in the political sphere to ensure the ideological and operational assumptions of the Brazilian psychiatric reform. This new order was intended to (re) integration, user building citizenship and autonomy and demystification about madness, stigmatized throughout the centuries.<sup>1,7</sup>

The National Mental Health Policy in force in Brazil, aims to progressively reduce beds in psychiatric hospitals, expanding, qualifying and strengthening the extra-hospital network through the implementation of alternative services as: Psychosocial Care Centers (CAPS), Residential Services Therapeutic (SRT) and Psychiatric Units in General Hospitals (GHPU) – including the actions of mental health in primary care, implementation of comprehensive care policy to users of alcohol and other drugs, Back Program for Home, among others.<sup>7</sup>

In this conjuncture and historical perspective, the nursing care to people with mental disorders in Brazil aligns the reformist principles requiring health professionals a practice contrary to the started with traditional psychiatry.<sup>8</sup> The psychosocial model involves collective practices, horizontality of relationships, family involvement and users in treatment, emphasizing the social reinsertion and devising psychosocial rehabilitation. Many nurses have yet to structure their work in new services by living with the limitations in a formation that travels between the biological-technical model and the pursuit of a humanistic education.<sup>9</sup>

Throughout the course, in the past and present, it is required a rethinking of nursing practice and its inclusion in the new mental health services. In this modality of attention, daily-doing needs to interdisciplinary work, plural forms of care in the professional roles are in constant process of transformation.<sup>7</sup> Thus, it is necessary that nursing professionals have as a care perspective psychosocial rehabilitation and development of people with practical following the principles of the Psychiatric Reform, which has required the expansion of their knowledge to act in this new care context.<sup>8</sup>

Based on these and considering the process of deinstitutionalization in mental health, this movement also reflects the political engagement of nursing in this area of knowledge. Also, no less true that they have been made in recent areas of nursing work. Thus, it aimed to synthesize the knowledge produced on nursing practice in deinstitutionalization process in mental health.

## METHOD

This is an integrative literature review, which enables the synthesis of knowledge on a particular topic or subject, followed by a systematic treatment and provides a

deepening of the current discussions and great interest to the professional clinical practice.<sup>10</sup>

In line with the method, the following steps were followed: a) theme selection or formulation of the question; b) definition of the sample or literature search of studies; c) categorization of studies; d) assessment of included studies; e) discussion/interpretation of results; f) knowledge synthesis and dissemination of results.<sup>10</sup>

An integrative review of the question: what is the role of nursing in the process of deinstitutionalization in mental health?

In the search process of the primary studies, we used the following online databases: Cumulative Index to Nursing and Allied Health Literature (CINAHL), Scopus and Latin American and Caribbean Health Sciences (LILACS), through the keywords: Mental Health, Nursing and Deinstitutionalization and the Boolean operator and, combined and modified according to the characteristics of each database, thus ensuring a wide search. As the deinstitutionalization keyword is not in Mesh, it adopted the intersection of the terms "Mental Health Services" and "Nursing Care" during the search in Scopus and CINAHL databases.

The inclusion and exclusion criteria of the primary studies used were: articles that answered the question, published in English, Spanish and Portuguese. The time frame adopted was fifteen years from 1998 to 2014, which includes the strengthen time of the reform and the national publication of Law No. 10.216/2001. Exclusion criteria were literature reviews, stories, editorials, dissertations, theses, opinions and letters. To collect data, a search protocol for review was elaborated,<sup>11</sup> containing the following items:

database, year of publication, article title, authors, database, journal, method, and results.

Thus, to ensure uniformity in the searches, two researchers proceeded to search independently, selecting items, whose titles and abstracts suited the purpose of the study and the established inclusion and exclusion criteria and were selected by both. In CINAHL database, there were 36 references preselected, 14 articles in Scopus and 22 articles in LILACS, totaling 72 articles.

For a new reading of the pre-selected abstracts, there were 36 articles selected in CINAHL database, excluding 33 of them, and only three articles fit in the review. In the 14 articles of Scopus, none met the established criteria; all were excluded. In LILACS, there were 22 identified, 17 studies were excluded, and five were included in the review. Thus, there were obtained seven articles as final sample. It was opted for the analysis and synthesis of primary studies descriptively.

## RESULTS

The studies found are characterized according to a year of publication, journal, authors, study object and conclusion (Table 1). All the scientific articles published in journals were used, five national and only two international articles.

Participants' articles of this review have methodological character and qualitative approach. Through this integrative review, it was considered: five articles published in Brazil, one in New Zealand, and the same number in Philadelphia and Pennsylvania/USA. The results showed the articles mainly published in Brazilian journals.

**Table 1** – Synthesis of studies found on nursing and the deinstitutionalization process in the context of mental health, according to publication year, journal, authors, type design/objective and conclusion. Natal, 2014

Year	Journal	Authors	Study Object	Conclusion
1998	Revista Brasileira Enfermagem	Mello R <sup>12</sup>	Understanding the work of the nurse who works in these new areas of care with an interdisciplinary team.	Interdisciplinary work in Hospital-Dia has been seen as a sine qua non to optimize the care of people with severe mental suffering.
2001	International Journal of Mental Health Nursing	Crowe et al <sup>13</sup>	Assess whether the work of mental health nurses provided is meeting the community's needs	The nurses as critical to the success of the work in the community for their ability and willingness to be and the specific requirements of the organization of services geared to users.
2004	Cogitare Enfermagem	Souza KKB et al <sup>14</sup>	Describe the concepts of nurses working in the Family Health Program (PSF) on the nursing work process, the characteristics of this process, and aspects of the health-disease process addressed in their professional practice.	Nurses are incorporating new aspects of the proposal of Public Health in their work process in paradigmatic overcoming and proposals of the Psychiatric Reform. The design of the nurses on the mental health illness lacks integration with social, economic and cultural conditions. The PSF as a means of decentralization of mental health services provides the deinstitutionalization of the disease and the person with mental illness

(To be continued)

(Continuation)

Year	Journal	Authors	Study Object	Conclusion
2005	Revista de Escola de Enfermagem da USP	Silva ATMC et al <sup>15</sup>	This qualitative study aimed at understanding the nursing work in the Hospital-Dia, given the psychiatric reform.	The nursing work incorporates the formal, technical and specialized quality, a political quality indicating a new meaning to the nursing work process.
2007	Arquivos de Ciências da Saúde	Lemos SS, Lemos M, Souza MGG <sup>16</sup>	Identifying the preparation of professional nurses of the Basic Family Health Unit in the illness and the mentally ill, and what is their role for the patient and his family.	Qualification needs of nurses working in primary care and greater community involvement with the ESF; expanding joint, qualified and multidisciplinary actions (family support, group activities, among others) for the deinstitutionalization of mental patients and their reintegration into society.
2010	International Journal of Mental Health Nursing	Loukidou E, Ioannidi V, Kalokerinou-Anagnostopoulou A <sup>17</sup>	Assessing the behavior of psychiatric nurses in mental health services to identify aspects of the bureaucracy over the workers and to propose an educational system that could enhance the changes at work.	The psychiatric nursing, as exercised in traditional settings, has been dealing with various issues regarding: the amount and quality of time spent with patients, the type of functions performed, the lack of autonomy.
2011	Esc Anna Nery Rev Enferm	Silva DS, Azevedo DM <sup>18</sup>	Investigating the perceptions of nursing professionals active in Therapeutic Residential Services on Psychiatric Reform, and its relation to the technical and scientific training and professional practice.	The Psychiatric Reform perceived by nursing professionals as a movement that proposes changes in the organization of mental health services in their posture and professional practice, requiring other ways to care and see people with mental disorder. Psychosocial incorporation is strengthened at work, a more horizontal and humanized posture; it is responsible for the development, recovery, and rehabilitation of users.

## DISCUSSION

Through the analysis and synthesis of primary studies included in this review, there was the movement of transformation and critical/questioning attitude on the Nursing actions to deinstitutionalization in mental health in recent years, particularly in the national literature. In this context, it was adopted and qualified network of intermediary services in mental health, for the community, based on interdisciplinary and multidisciplinary work in health, where nursing professionals enrolled in the social, historical and political dimension, and the condition a member of this team has an important role in the user's treatment.<sup>1-9,19</sup>

As the historical process of the psychiatric reform strengthened in many countries associated with the adoption of therapeutic instruments with emphasis on care in psychosocial rehabilitation and psychotherapy groups, it directly influenced the current international scenario of care for mental health nursing.<sup>18-20</sup>

A recent study in Brazil investigated the perceptions of nursing professionals about the Psychiatric Reform and its relationships to the technical and scientific training and professional practice.<sup>18</sup> It was identified a change movement in the organization of mental health services in its posture

and professional nursing practice, requiring other ways to care and see people with mental disorder. A movement that goes beyond the user-nursing relationship and involves the family and social context from the perspective of territorial networks.

It is understood that in the context of mental health care, nursing has an important role in strengthening practices geared to the precepts of the Psychiatric Reform, as the rescue of citizenship and autonomy of people with mental disorders.<sup>15</sup> To this end, it reinforces not only the technical skills of nursing in the actions and activities but also the ethical and political capacity to act upon emerging everyday demands of their work process.<sup>15</sup>

The study evaluates the care provided by nurses to users in the mental health field.<sup>13</sup> It highlighted the relevance of nurses in the care of users of mental health in the community. Also, it stressed the capacity and the will of these professionals as important elements for success in the organization of replacement services and user satisfaction.

Also, the challenges for nursing practice from the perspective of deinstitutionalization, a psychosocial assistance and reinvention of a clinical practice managed by different professionals, identified the lack of preparation for the nurses to work in mental health, as well as lack of

coordination between existing services that make up the network of specialized psychosocial care and the Family Health Strategy (ESF), particularly in Brazil.<sup>14,20</sup> Mental health in the context of psychosocial care and its interface with the Family Health Strategy (ESF) suffer from a shortage of skilled human resources.<sup>1,7</sup>

Nursing care processes to the person with mental disorders in psychosocial care brought by the reform expose the challenge to be overcome, the predominance of bureaucratic and administrative activities by the nurse in a mental health service.<sup>18-20</sup> To do this, they propose changes in the educational system in the formation of nursing professionals for a new mental health care.

Moreover, the principles of interdisciplinary and completeness are mentioned<sup>12</sup> as fundamental to deinstitutionalization in mental health level and for the daily nursing care of patients with mental disorders and their families in substitutive services.

## CONCLUSION

The nursing performance to the process of deinstitutionalization of mental patients experienced changes in recent years. Before, the care practices developed by nurses followed a logic control/physical restraint, from the realization of specific procedures such as administering medication and repressive behaviors that reinforced the hegemony of the asylum.

Currently, nursing prioritizes care guided by the humanization and comprehensiveness of care, from the adoption of interdisciplinary therapeutic activities aimed at the reintegration of people suffering from mental disorders in their family life and society attention to the RP process and through the implementation of the network of substitute services in the countries. It is highlighted the interpersonal relationships to create a link between patient-nursing-family, and, therefore, improving the quality of life.

It is stressed that the process of training in nursing should instrumentalize future professionals for the development of skills/abilities meet the challenges and changes after the RP and the new logic of organization of mental health services in the territory.



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### Author responsible for correspondence:

João Mário Pessoa Júnior

Rua Francisco Martins de Miranda, 339

Centro, Caraúbas/RN

ZIP-code: 59780-000

E-mail: joao.pessoa@ufersa.edu.br